(Appendix A)

Note: Teacher will complete this prior to student's exit from High School and send information to secured DOE/SEP website, Pierre, S.D.							
1.	Gra	adua	te's First Name:				
2.	Mic	ddle	Name (optional):				
3.	Las	st Na	me:				
4.	SIN	IS#					
			e student's name whether they d			from high school with a diploma,	certificate of
5. Ad	dress	:				_	
6. Birth Date: (Month/Day/Year)/							
7. Tel	epho	ne #	: 8. Cell #			9. e-mail	
10. Sc	hool	Dist	rict:	11	. Hig	h School:	
12. Ex	xit St	atus	: (1) Regular Diploma [] (2) A	.ged	out \square (3)	
			☐ (4) Graduated with other ☐				
						ED] 🗀 (3) Dropped out	
			☐ (6) Other				
			udents meeting graduation requirement t age 21 should be marked "aged out."		he IEP	should be marked "diploma." Students &	exiting without a
13. G	ende	r :	□ (1) Male □ (2) Female				
14. Ra	ace/E	thni	city: (Select one)				
		(1)	Asian		(5)	Native Hawaiian/Pacific Islander	
		(2)	Black/African American		(6)	White	
		(3)	Hispanic/Latino American		(7)	Two or more races	
		(4)	American Indian/Native Alaskan	П	(8)	Not disclosed	

15. Disability: (Refer to list below & write in the disability status/code.)										
 01 – Emotional/behavioral disa 02 – Orthopedic impairments 03 – Health impairments 04 – Specific learning disabiliti 05 – Mental retardation 	07 08 9 -	06 – Multiple disabilities 07 – Deafness 08 – Hearing impairments 9 – Visual impairments 10 – Deaf-Blindness				 11 – Communication disorders 12 – Autism 13 – Traumatic brain injury 				
From the Transition Plan in the final IEP, please obtain answers to #16 and #17.										
16. Anticipated post school outcome(s): (Check all that apply.)										
University/4-year college		(5)	Suppor	rted e	emplo	yment		(9)	Left blank	
(2) Community/2-year college		(6)	Militar		1	<u> </u>		(10)	Not applicable	
(3) Vocational/technical college		(7)	Supported living				(11)	Other:		
(4) Employment		(8)	Indepe	nden	t livii	ng				
17. Which of the following linkages with adult services were recommended for the student at graduation? (Check all that apply.)										
☐ (2) Division of Developmental D					(6)	Left bla	t blank			
``	=						applicable			
(4) Work Study	(4) Work Study				(8)	Other:_				
18. Did this student take the most recent statewide assessment (during junior year—or if student dropped out before junior year, during eighth grade)? Read each line 13a to 13e and enter one of the following codes:										
\square (1) Yes \square (2) No \square (3) Don't know										
☐ (13a) Regular assessment with no accommodations										
 ☐ (13b) Regular assessment with accommodation ☐ (13c) Alternate assessment against grade level achievement standards (Not available in SD for 06/07) 										
(13d) Alternate assessment against alternate achievement standards										

☐ (13e) Alternate assessment against modified achievement standards (Not available in SD for 06/07)
19. Was this student identified as an English Language Learner (ELL) during the student's last year of school?
□ (1) Yes □ (2) No □ (3) Don't know
20. During high school, did this student participate in any of the following: ☐ Catch the Wave, ☐ Project Skills, ☐ Self-advocacy training ☐ Youth Leadership Forum,
21. In the last year of high school, does/did the student work in any of the following? (check each option that applies)
☐ (15a) Volunteer
☐ (15b) Work experience/work study
☐ (15c) Competitive employment
☐ (15d) Don't know
22. How many years of Math classes did this student complete during high school?
\square (1) One \square (2) Two \square (3) Three \square (4) Four
23. Did this student complete at least one semester of Algebra?
□ (1) Yes □ (2) No
 23b. Which Algebra was taken: □ (a) Algebra with non-disabled peers □ (b) Modified algebra separate from non-disabled peers.
23c. What grade did the student receive in Algebra?
\square (1) \square (2) \square (3) \square (3) \square (4) \square (4) \square

CONTACT INFORMATION AFTER LEAVING HIGH SCHOOL

Family member name:						
Address:						
Home Phone:						
Cell Phone:						
E-mail:						
Family member name:						
Address:						
Home Phone:						
Cell Phone:						
E-mail:						
Best Friend name:						
Address:						
Home Phone:						
Cell Phone:						
E-mail:						